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PTO/SB/97 (08-03)

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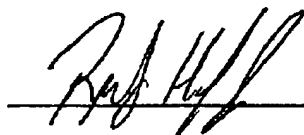
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U.S. Application No. 09/900,479
Title: Assisted Scratch Removal
Filing Date: July 6, 2001

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Fax Transmittal Cover Sheet (1 page)
Statement Under 37 CFR 3.73(b) (1 page)
Revocation of Power of Attorney with New Power of Attorney and Change of
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Total Pages in Transmission: 3

PTO Fax Number: 703.872.9306

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Mikhail Trifonov, Olga Sharonova, Krzysztof ZaklkaApplication No./Patent No.: 09/800,478 Filed/Issue Date: Jul 5, 2001 / NAEntitled: Assisted Scratch RemovalJaso Corporation Incorporateda corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %
in the patent application/patent identified above by virtue of either:

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OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

5/24/04

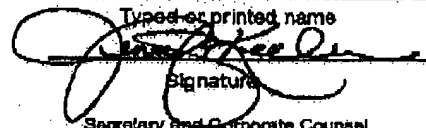
Date

(952) 294-2349

Telephone number

Jennifer Keeler

Typed or printed name



Signature

Secretary and Corporate Counsel

Title

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/900,479
	Filing Date	7/6/2001
	First Named Inventor	Trifonov
	Art Unit	
	Examiner Name	
	Attorney Docket Number	JASC007-USP

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 45346☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number: 45346

OR

☐ Firm or
Individual Name

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name Jennifer Keeler, Secretary for Jasc Software, Inc.

Signature 

Date 7/14/04 Telephone 952-294-2349

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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